# North Carolina Superfund Section SITE HEALTH AND SAFETY PLAN

## A. General Information Site Name Ulah Battery/Battery Piles ID# NCD981864614 Location State Road 1219/Dinah Road and Highway 22) Asheboro/ Ulah area. Residential neighborhood next to open field (furniture Company business lot) where battery chips were left as a result of past battery breaking operations. Proposed Date of Investigation: Date of Briefing: 4-17-2015 Date of Debriefing: 5-17-2015 Nature of Visit (check one): On-Site Reconnaissance Off-Site Reconnaissance Sampling Sampling Overview Sampling by use of XRF on shallow (0-6 inch) soil samples.

#### Remediation Overview

Contractor, S&ME, under contract with NC DENR, Division of Waste Management Inactive Hazardous Sites Branch of Superfund plans to remove up to a maximum of 17 -50ft x 50ft soil grids from 0 to 6 inches in depth. Division of Waste Management staff to XRF soil samples as first phase of work to reduce soil that has to be removed. Removal to take place in may by S&ME subcontractor. Lead contaminateed soil to be treated with Environblend to prevent leaching.

Health Department Official Contacted: Randolph

Date of Contact:

Site Investigation Team: All site personnel have read the Site Health and Safety Plan and are familiar with its provisions.

	Personnel	Responsibilities	Signature
Team 1 Team 2 Keith Si	navely, Melanie Ba	artlett- sampling/recon	
Plan Preparation: Prepared By: Reviewed By:	Keith Snavely Keith Snavely Brian Polk		
B. SITE/WAST	E CHARACTERIS	STICS	
Waste Type(s)  Liquid  Solid  ✓  Sludge  Comments:		Gas Vapor	
Lead contaminate	ed soil from batter	y reclamation project	
Clarate : II			
Characteristics:		V 1	
Corrosive		Volatile	
Ignitable Radioactive		Toxic 🗸	
Others Explain:		Reactive	
Comments:			

List Known or Suspected Hazards (physical, chemical biological or radioactive) on Site and their toxicological effects. Also, if known, list chemical amounts

HAZARDWARNING PROPERTIESEXPOSURE LIMITLeadOdor Threshold OT0.05 mg/m3

<u>UNDE</u>	RGROUND	UTILITIES CHECKLIST R	equired	YES	NO 🗌
<u>Utility</u>		Locator/Contact Person	Phone #	<u>Date</u>	of Location
Power	NA				
Teleph	none NA				
Gas	NA				
Water	NA				
Sewer	NA				
Call ma	ade by: C	Call not necessary at Phase	e I of XRF wor	k by DWM	staff

January at the desired to the work by by will start

Facility Description: Size: unknown Buildings: unknown

Disposal Methods Being Investigated:

Surface disposal

Unusual Features on Site (dike integrity, power lines, terrain, etc.): none klown

#### History of the Site:

Residents collected formerly used car batteries and broke them open to reclaim the lead plates. Lead Plates were taken to lead smelter for profit. Remaining battery casings and battery acids disposed of on residential and business lots. First major removal action occurred in early 1990s, by US EPA and NS DENR, followed by additional site investigations in 2009 and removal actions by EPA in 2012. Additional removal action of lead battery chips and lead contaminates soil to occur in May 2015 for parcel at Dinah Road and Business 220 in Ulah.

## **C. HAZARD EVALUATION**

Area can be toured in level D protection by DENR staff for XRF work prior to any work conducted by Contractor. Sampling will be just for XRF data at this time. Chemically resistant, steel toed work boots will be worn while touring and collecting soil samples for XRF screening/evaluating.

D. WORK PLAN INSTRUCTION
Map or Sketch Attached?
Perimeter Identified?
Command Post Identified?
Zones of Contamination Identified?
Personal Protective Equipment/Level of Protection:
Modifications
Surveillance Equipment:
HNU Detector Tubes and Pumps
OVA 02 Meter
Explosimeter Radiation Monitor
<u>Decontamination Procedures</u>
Level C Respirator wash, respirator removal, suit wash (if needed), suit removal, boot wash, boot removal and glove removal.
Level D Boot wash and rinse and boot removal, suit removal, glove and goggle removal. Goggles will be worn while deconning field equipment. Modifications Dispose of trash properly, on-site if possible.

#### Work Schedule/Visit Objectives:

The purpose of this visit is to determine the extent of previously sampled lead contaminated soil 50 ft X 50 ft grids of soil/grass by US EPA. Composite samples will be collected to use for screening with XRF. The site visit is to determine if the proposed amount of soil for cleanup can be reduced in sized by collecting composite soil samples.

#### **EMERGENCY PRECAUTIONS**

#### Route of Exposure First Aid

Eyes- irrigate immediately

Skin- soap and water wash

Inhalation- fresh air and artificial respiration

Ingestion- get medical attention immediately

#### STATE POISON CONTROL CENTER: 1-800-848-6946

Location of Nearest Phone: unknown Hospital (Address and Phone Number)

Fire:

Ambulance:

911

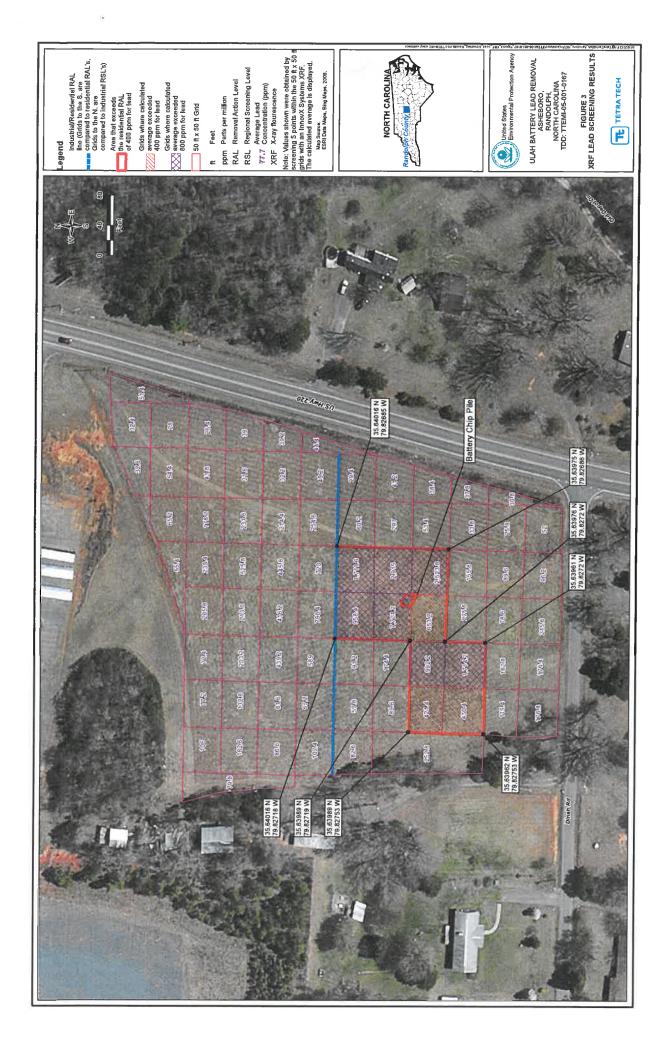
Emergency Route to Hospital:

#### **EQUIPMENT CHECKLIST**

Air purifying respirator
First Aid Kit
Cartridges for respirator
3 gallon Deionized H<sub>2</sub>0
Eye Wash Unit
Rain suit
HNU
Gloves (PE/PVC/nitrile/cloth)
OVA

Boots/Boot Covers
Explosimeter
Coveralls (tyvek/saranex)
Radiation Monitor
Safety Glasses
Safety Goggles
Decontamination Equipment
Hard Hat

Please submit the Air Monitoring and Injury Report Form.





Trip to: **364 White Oak St**Asheboro, NC 27203-5434
5.25 miles / 9 minutes
Notes

## Is Ken Fisher nuts?

Some Wall Streeters might think he is, because Ken, famous Forbes columnist and head of Fisher Investments, is giving away his new Report to investors with \$500,000 or more portfolios. Is that you? You should have this timely Report, with a stock forecast you won't find anywhere else. You'll see quickly: Ken Fisher not only isn't nuts. He's the one with the brains.

**GOT THAT? GET THIS. CLICK HERE.** 

FISHER INVESTMENTS'

	116 Dinah Rd, Asheboro, NC 27205-1020	Download Free App
•	1. Start out going east on Dinah Rd toward US Highway 220 Business S. Map	0.05 Mi 0.05 Mi Total
4	2. Turn left onto US Highway 220 Business S. Map Randolph Memorial Park is on the corner	<b>2.2 Mi</b> 2.2 Mi Total
1	3. US Highway 220 Business S becomes S Fayetteville St / US-220 Bus N. Map	<b>2.9 Mi</b> 5.1 Mi Total
4	4. Turn left onto Macarthur St. Map Macarthur St is just past W Ward St If you reach Burns St you've gone a little too far	<b>0.1 Mi</b> 5.2 Mi Total
4	5. Turn <b>right</b> onto <b>White Oak St</b> . <u>Map</u>	<b>0.03 Mi</b> 5.2 Mi Total
	6. <b>364 WHITE OAK ST</b> is on the right. Map If you reach Foust St you've gone a little too far	
	<b>364 White Oak St</b> , Asheboro, NC 27203-5434	

#### Total Travel Estimate: 5.25 miles - about 9 minutes



©2015 MapQuest, Inc. Use of directions and maps is subject to the MapQuest Terms of Use. We make no guarantee of the accuracy of their content, road conditions or route usability. You assume all risk of use. View Terms of Use

Date of Injury:

Name of Employee: Last:

y (1 - 8. a

## WC Authorization | Physician's Report | Pharmacy Guide

MAILING ADDRESS: P.O. Box 77880, Charlotte, NC 28271 800-365-5998 www.corvel.com

**EMPLOYER:** Please complete the top section and give to the injured employee to take with them to their authorized treating physician. If you already have transitional duty job descriptions available, please attach a copy for the treating physician's review.

First:

Name of Employer: Employer Signature:	Treating Phys	sician:	
EMPLOYEE: Please take this form with you to an aut and return this immediately to your employer. The bottom prescriptions filled as prescribed by your authorized treat	m section is for you to sh	ow the pharmacis	e physician complete the middle section t should you need to have any
AUTHORIZED PHYSICIAN, PLEASE COMPLI	ETE		
Diagnosis:			
post accident drug test (check one) ( ) has been con	mpleted (	) has not been con	mpleted
( ) May resume work immediately, no restrict ( ) May resume work immediately with the form ( ) Sedentary work (sitting, occasion ( ) Light work (lifting less than 20 pp. ( ) Medium work (lifting less than 50 pp. ( ) Heavy work (lifting less than 10 pp. ( ) Normal shift ( ) Limited hours: hrs, ( ) Other:  ( ) Repetitive Motion Restrictions (specific to	ollowing restrictions: onal walking, standing, lif pounds) 50 pounds) 00 pounds) hrs,hrs per day		
Frequency	Left	Right	
No Use			
Occasional <33% of time	_		
Frequent 34-66% of time Regular 67-100% of time			_
Patient may return to work at full duty on (     Patient has a return appointment on (date) lease indicate any referrals that are required:			at (time)
	Date		Physician's Name (type or print
Physician's Signature	Date		

**PHARMACIST:** Please use the Injured Worker's **SSN and Date of Injury (SSN+MMDDYYYY)** as their 17 digit Identification Number when entering information to process an online claim to CorVel on behalf of Department of Environmental and Natural Resources injured employees. Pharmacies can contact the **CorVel Customer Service at 800-563-8438 or CVS/Caremark Pharmacy Help Desk at 877-876-7216,** for assistance with claims processing.

#### DO NOT CHARGE THE PATIENT FOR THE PRESCRIPTION.

CHAIN NAME	CHAIN NAME	CHAIN NAME	CHAIN NAME
Bi-Lo Pharmacy	Horizon Pharmacy	Revco drugs	VIX Pharmacy
Bi-Mart	HyVee Drugtown	Rite-Aid drugs	Walgreen's
Brooks Drugs	J & J Pharmacy	RX Discount Pharmacy	Wal-Mart Pharmacy
Brookshire Brothers	Joel & Jerry's	Sack-n-Save	Wegman Pharmacy
Cub Pharmacy	Kash N Karry	Sav-A-Lot	Winn-Dixie
CVS Drugs	Kerr Drugs	Sams Club Pharmacy	
Drug Emporium	K-mart phey	Save Mart	
Eckerds(all others)	Long's Phcy	Stop N Shop	
Franck's Pharmacy	Medicine Shoppe	Super D	
Fred Meyer	Medistat Phcy	Super Valu	
Fred's Pharmacy	Milner-Rushing Drugs	Super X (HSI)	
Giant Pharmacy	Pathmark Pharmacy	Tom Thumb Phcy	
Goodings	Perry Drg Str	Tops Pharmacy	
Hannaford Food &	Phar-Mor	Tri Daly Drugs	

Group Number: RXFFWC311 CCRx BIN: 004336 PCN: ADV Rev. 6/10 Dept. of Environ. & Natural Res.

#### CORVEL

\* All participating pharmacies have not been included on this list. Please have your pharmacy call regarding any questions/ authorizations 800-563-8438. Name of Employee: Last:

y 11 to 16

## WC Authorization | Physician's Report | Pharmacy Guide

MAILING ADDRESS: P.O. Box 77880, Charlotte, NC 28271 800-365-5998 www.corvel.com

**EMPLOYER:** Please complete the top section and give to the injured employee to take with them to their authorized treating physician. If you already have transitional duty job descriptions available, please attach a copy for the treating physician's review.

First:

Occasional < 33% of time   Frequent 34-66% of time   Regular 67-100% of time			
Frequent 34-66% of time Regular 67-100% of time  ( ) Patient may return to work at full duty on (date)  ( ) Patient has a return appointment on (date)			
Frequent 34-66% of time Regular 67-100% of time	ate)	2	t (time)
Frequent 34-66% of time Regular 67-100% of time			
Frequent 34-66% of time			-
	í		
			-
No Use Occasional <33% of time			_
Frequency	Left	Right	
( ) Repetitive Motion Restrictions (specific to h	and/arm injuries):		
( ) Other:			
() Limited hours: hrs,hr	rs,hrs per day		
( ) Normal shift	pounds)		
( ) Medium work (lifting less than 50 ( ) Heavy work (lifting less than 100 (			
( ) Light work (lifting less than 20 po	unds)		
May resume work immediately with the foll     Sedentary work (sitting, occasional)		fting less than 10 no	ounds)
( ) May resume work immediately, no restriction	on.		
n accordance with this patient's physical capability, check	all that apply:		
A post accident drug test (check one) ( ) has been comp	pleted (	) has not been con	mpleted
Diagnosis:			
AUTHORIZED PHYSICIAN, PLEASE COMPLET	TE		
and return this immediately to your employer. The bottom prescriptions filled as prescribed by your authorized treating	section is for you to sl	now the pharmacist	should you need to have any
EMPLOYEE: Please take this form with you to an author	orized treating physicia	n Please have the	physician complete the middle section
	Treating Phy	sician:	
TABLOWEE DI	Treating Phy		

**PHARMACIST:** Please use the Injured Worker's **SSN and Date of Injury (SSN+MMDDYYYY)** as their 17 digit Identification Number when entering information to process an online claim to CorVel on behalf of Department of Environmental and Natural Resources injured employees. Pharmacies can contact the **CorVel Customer Service at 800-563-8438 or CVS/Caremark Pharmacy Help Desk at 877-876-7216**, for assistance with claims processing.

#### DO NOT CHARGE THE PATIENT FOR THE PRESCRIPTION.

CHAIN NAME	CHAIN NAME	CHAIN NAME	CHAIN NAME
Bi-Lo Pharmacy	Horizon Pharmacy	Revco drugs	VIX Pharmacy
Bi-Mart	HyVee Drugtown	Rite-Aid drugs	Walgreen's
Brooks Drugs	J & J Pharmacy	RX Discount Pharmacy	Wal-Mart Pharmacy
Brookshire Brothers	Joel & Jerry's	Sack-n-Save	Wegman Pharmacy
Cub Pharmacy	Kash N Karry	Sav-A-Lot	Winn-Dixie
CVS Drugs	Kerr Drugs	Sams Club Pharmacy	
Drug Emporium	K-mart phcy	Save Mart	
Eckerds(all others)	Long's Phcy	Stop N Shop	
Franck's Pharmacy	Medicine Shoppe	Super D	
Fred Meyer	Medistat Phcy	Super Valu	
Fred's Pharmacy	Milner-Rushing Drugs	Super X (HSI)	
Giant Pharmacy	Pathmark Pharmacy	Tom Thumb Phey	
Goodings	Perry Drg Str	Tops Pharmacy	
Hannaford Food &	Phar-Mor	Tri Daly Drugs	

Group Number: RXFFWC311 CCRx BIN: 004336 PCN: ADV Rev. 6/10 Dept. of Environ. & Natural Res.

#### CORVEL

\* All participating pharmacies have not been included on this list. Please have your pharmacy call regarding any questions/ authorizations 800-563-8438.

#### Snavely, Keith

From:

Polk, Brian

Sent:

Friday, April 10, 2015 10:14 AM

To:

Snavely, Keith

Subject:

RE: Ulah Battery Health and Safety Plan with all maps and Corvel form

**Attachments:** 

SF Site Safety Plan Keith Snavely 4-10-2015.pdf

Keith,

Please add the following PPE for work around earth moving equipment and site: safety glasses (100%), hard hat, safety vest, and Tyvex suit (can be tied at waist).

Thanks Brian

Brian N. Polk
Health and Safety Consultant II
NC Division of Waste Management
919-338-2915 office
919-338-2936 fax
919-270-3003 cell

Email correspondence to and from this address may be subject to the North Carolina Public Records Law any may be disclosed to third parties.

From: Snavely, Keith

Sent: Friday, April 10, 2015 8:53 AM

**To:** Polk, Brian **Cc:** Bartlett, Melanie

Subject: Ulah Battery Health and Safety Plan with all maps and Corvel form

Brian,

See attached plan with all the necessary maps that the first one I sent you did not have. Trip is scheduled for Tuesday April 21, 2015.

Thanks Keith

Keith Snavely, Hydrogeologist Inactive Hazardous Sites Branch NC Division of Waste Management

Office #: (919) 707-8355 Fax #: (919) 707-8355 email: Keith.Snavely@ncdenr.gov

Address: Green Square Complex

DENR Office Building 217 West Jones Street

Office 3212-E Raleigh, NC 27603

1646 Mail Service Center Raleigh, NC 27699

#### INTERACTIVE MAPS WITH DWM SITES AND PERMITTED FACILITIES:

http://portal.ncdenr.org/web/wm/gis/maps

#### **ONLINE ACCESS TO SUPERFUND SECTION DOCUMENTS:**

http://portal.ncdenr.org/web/wm/sf-file-records

Email correspondence to and from this sender is subject to the NC Public Records Law and may be disclosed to third parties